

## PART B - FEE(S) TRANSMITTAL

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26530 7590 04/19/2010  
**LADAS & PARRY LLP**  
**224 SOUTH MICHIGAN AVENUE**  
**SUITE 1600**  
**CHICAGO, IL 60604**



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Brian W. Hameder	(Depositor's name)
	(Signature)
July 13, 2010	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/520,321	10/27/2005	Masahiro Tatsuzawa	CU-6585	5928

TITLE OF INVENTION: GREEN PIGMENT FOR COLOR FILTER, GREEN PIGMENT DISPERSION, PHOTOSENSITIVE COLOR COMPOSITION, COLOR FILTER, AND LIQUID CRYSTAL PANEL

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	07/19/2010

EXAMINER	ART UNIT	CLASS-SUBCLASS
MCPHERSON, JOHN A	1795	430-007000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	LADAS & PARRY LLP
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		
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## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

## (A) NAME OF ASSIGNEE

- 1) DAI NIPPON PRINTING CO., LTD.  
 2) DIC CORPORATION

## (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Tokyo-to, Japan  
 Tokyo, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

## 4a. The following fee(s) are submitted:

- Issue Fee \$1510  
 Publication Fee (No small entity discount permitted) \$300  
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- A check is enclosed.  
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 12-0400 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date July 13, 2010

Typed or printed name Brian W. Hameder

Registration No. 45613

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